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Receipt  
2764#7

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

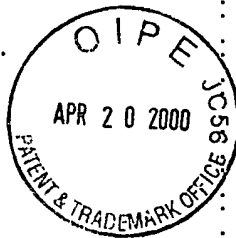
In re Application of:

Kenji YOSHIOKA et al.

Serial No. 09/492,288

Filed: January 27, 2000

For: EMERGENCY REPORTING  
SYSTEM AND TERMINAL  
APPARATUS THEREIN



Art Unit: 2735

Examiner: unknown

Atty Docket: 0102/0097

GROUP 2700

APR 28 2000

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REQUEST FOR CORRECTED OFFICIAL FILING RECEIPT

Assistant Commissioner for Patents

**ATTN: Application Processing Division  
Customer Correction Branch**

Washington, D.C. 20231

Sir:

A corrected filing receipt is hereby requested in view of the errors which appear in the original. For the convenience of the Patent and Trademark Office, attached is a photocopy of the original receipt on which the errors have been highlighted. Specifically, change the number of independent claims from "3" to "4" and in the title of the invention change "system" to "system".

As the errors were made by the Patent and Trademark Office, it is believed that no fee is due.

Respectfully submitted,

Louis Woo, RN 31,730  
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Date: April 20 2000

**FILING RECEIPT**

\*OC00000005032835\*

**UNITED STATES DEPARTMENT OF COMMERCE  
Patent and Trademark Office**Address: ASSISTANT SECRETARY AND  
COMMISSIONER OF PATENT AND TRADEMARKS  
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/492,288	01/27/2000	2735	690	0102/0097	12	19	2

Law Office Of Louis Woo  
1901 North Fort Myer Drive  
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**GROUP 2700**

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. **If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).**

**Applicant(s)**Kenji Yoshioka, Yokohama-shi, JAPAN;  
Yasutoshi Nakama, Ikoma-shi, JAPAN;  
Masashi Yamamoto, Sagamihara-shi, JAPAN;**Continuing Data as Claimed by Applicant****Foreign Applications**JAPAN 11-26656 02/03/1999  
JAPAN 11-36104 02/15/1999

If Required, Foreign Filing License Granted 04/05/2000

\*\*

**Title**Emergency reporting system and terminal apparatus therein  
system**Preliminary Class**

340

Data entry by : BLIZZARD, SHARON

Team : OIPE

Date: 04/06/2000



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Bib Data Sheet

UNITED STATES DEPARTMENT OF  
COMMERCE  
Patent and Trademark OfficeAddress: COMMISSIONER OF PATENTS AND TRADEMARKS  
Washington, D.C. 20231

<b>SERIAL NUMBER</b> 09/492,288	<b>FILING DATE</b> 01/27/2000 <b>RULE</b> -	<b>CLASS</b> <del>340</del> 455	<b>GROUP ART UNIT</b> <del>2735</del> 2682	<b>ATTORNEY DOCKET NO.</b> 0102/0097	
<b>APPLICANTS</b> Kenji Yoshioka, Yokohama-shi, JAPAN; Yasutoshi Nakama, Ikoma-shi, JAPAN; Masashi Yamamoto, Sagamihara-shi, JAPAN;					
** CONTINUING DATA <i>None DN</i>					
** FOREIGN APPLICATIONS <i>Yes DN</i> JAPAN 11-26656 02/03/1999 JAPAN 11-36104 02/15/1999					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 04/05/2000 **					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no		STATE OR COUNTRY JAPAN	SHEETS DRAWING 12	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after allowance					
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials					
<b>ADDRESS</b> Law Office OF Louis Woo 1901 North Fort Myer Drive Suite 501 Arlington, VA 22209					
<b>TITLE</b> Emergency reporting system and terminal apparatus therein					
<b>FILING FEE RECEIVED</b> 690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		